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**DECLARATION FOR UTILITY OR** 

DES	First Named Inve	entor	ANDREW	/ NUSS			
PATENT AF	N T		COV	APLETE IF H	KNOWN		
(37 CFR 1.63)			Application Num	per	1		-
Declaration	Declarati	ion	Filing Date				
Submitted OR With Initial	Submitte	ed after Initial	Art Unit				
With Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)		1.16 (e))	Examiner Name		-		<del></del>
	Toquiloc	<b>'</b>					
I hereby declare that:							
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.							
I believe the inventor(s) name	d below to be th	e original and first i	nventor(s) of th	ne subjec	t matter wh	nich is claime	ed and for
which a patent is sought on the	e invention entit	lled:					
A NEW GRAMMAR FO	OR REGUL	AR EXPRESS	IONS				11
		(Title of the I	Invention)			·	
(Title of the Invention) the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/Y	YYY)		as United S	itates An	nlication Nu	imber or PC	T International
		30	] as ormed e	raico , ip			T international
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as							
amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application							
and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority	benefits under	r 35 U.S.C. 119(a)	-(d) or (f), or (	365(b) of	any foreig	n applicatio	n(s) for patent,
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign							
application for patent, inventor	's or plant bree	der's rights certifica					
before that of the application of Prior Foreign Application	n which priority	Foreign Filing	Date	Prior	rity	Certified C	opy Attached?
Number(s)	Country	(MM/DD/YY)		Not Cla		Yes	No No
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Additional foreign applicat	ion numbers ar	e listed on a supple	mental priority	data she	et PTO/SB	/U2B attache	ed hereto.

[Page 1 of 2]

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (06-03)

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## **DECLARATION** — Utility or Design Patent Application

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Address 1930 NORTH CALIFORNIA BLVD., SUITE 720  City WALNUT CREEK  CA  Telephone 925.937.1515  925.937.1529  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and turther that these statements were made with the knowledge that willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (Rissland middle [if anyl))  Residence: City State Apeltition has been filed for this unsigned inventor  Signature  Residence: City State SAN ANTONIO TX  NAME OF SECOND INVENTOR:  Given Name (first and middle [if anyl))  NAME OF SECOND INVENTOR:  Given Name (first and middle [if anyl))  Inventor's Signature  Country  A peltition has been filed for this unsigned inventor  Family Name (first and middle [if anyl))  Inventor's Signature  Country  Citizenship U.S.  Date  City State Country Citizenship  Date  Given Name (first and middle [if anyl))  Inventor's Signature  Residence: City State Country Citizenship  Country Citizenship  Date  City Name  Citizenship  Date  Citizenship  Date  Citizenship  Country  Citizenship  Date  Citizenship  Date  Citizenship  Country  Citizenship  Country  Citizenship  Country  Citizenship  Date  Citizenship  Date  Citizenship  Country  Citizenship  Country  Citizenship  Country  Citizenship	Name		-							
City State Country U.S. Telephone 925.937.1515	CHARLES L. THOEMING/Bielen, La.	mpe & Thoeming	1							
WALRUT CREEK  Country U.S.  Telephone 925.937.1515  Par 925.937.1529  1 hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and turther that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (Figs.) A petition has been filed for this unsigned inventor  Residence: Gity State TX  Country U.S.  Date  Date  ID—21—2003  Residence: Gity State TX  V.S.  NAME OF SECOND INVENTOR:  Given Name (First and middle [if any])  Inventor's Signature  A petition has been filed for this unsigned inventor  Family Name Family Name Family Name or Surname  Date  Date  Country U.S.  Apetition has been filed for this unsigned inventor  Given Name (First and middle [if any])  Inventor's Signature  Residence: City State Country Citizenship  Mailing Address  City State Country Citizenship  Country Citizenship	Address 1990 NORTH CALIFORNIA BLVD., :	SUITE 720								
Country U.S.  Telephone 925 937.1515  Fax 925.937.1529  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (RISSLAND middle (if any!))  Inventor's Signature  Signature  Signature  City State TX  NAME OF SECOND INVENTOR:  City Name  Family Name  Citizenship U.S.  ZIP Country U.S.  A petition has been filed for this unsigned inventor  City Name (first and middle (if any!))  Inventor's Signature  City Name  Family Name  City State  Country  Citizenship  Country  Citizenship  Country  Citizenship  Mailing Address  City State  Country  Citizenship  City  Mailing Address  City State  City State  City State  City State  City Country  Citizenship	City				State				ZIP	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (first and middle (if any!))  Inventor's Signature  A petition has been filed for this unsigned inventor  Family Name (Symmane)  Country  U.S.  Country  Citizenship  U.S.  A petition has been filed for this unsigned inventor  Family Name (U.S.  City  State  Country  U.S.  Country  Citizenship  U.S.  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Given Name (first and middle (if any!))  Inventor's Signature  Residence: City  State  Country  Country  Citizenship  Date  Family Name or Surname  City State  Country  Citizenship  Date  City State  Country  Citizenship  Date  City State  Country  Citizenship  Date	WALNUT CREEK				CA			94596		
Inventor's Signature  City State TX Pacton Inventor TX Pacton Inventor's Signature  City SAN ANTONIO TX Pacton Inventor's Signature  City Name (first and middle [if any])  Inventor's Signature  City Name (first and middle [if any])  Inventor's Signature  City Name (first and middle [if any])  Inventor's Signature  City State TX Pacton Inventor:  Civen Name (first and middle [if any])  City State TX Pacton Inventor:  City State Typ Country  Citizenship  Inventor's Signature  Residence: City State Country Citizenship  Country Citizenship  Date  Country Citizenship  Mailing Address  City State Zip Country  Citizenship  Country  Citizenship  Date  Country  Citizenship  Country  Citizenship  Date	Country Telephone			)	,					
and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name  (fighted)  Given Name  (fighted)  Inventor's  Signature  Residence: City  State  Country  U.S.  Citizenship  U.S.  Citizenship  U.S.  NAME OF SECOND INVENTOR:  Given Name  (first and middle [if any])  Inventor's  Signature  A petition has been filed for this unsigned inventor  City  State  ZIP  Country  U.S.  NAME OF SECOND INVENTOR:  Given Name  (first and middle [if any])  Inventor's  Signature  City  State  Country  Citizenship  Date  Citizenship  Date  Citizenship  Citizenship  Citizenship  Citizenship	U.S.									
Given Name (first and middle [if any])  Inventor's Signature  Inventor's Signature  Residence: City State TX  Country U.S.  Country U.S.  Country U.S.  City SAN ANTONIO TX  ZIP TX  A petition has been filed for this unsigned inventor Given Name (first and middle [if any])  Inventor's Signature  Residence: City State TX  ZIP Country U.S.  A petition has been filed for this unsigned inventor Given Name or Surname  Date  Residence: City State Country  Citizenship  Citizenship  City State  City State  Country Citizenship  City Mailing Address  City State  ZIP Country Citizenship	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
Given Name  (Signature Middle (if any!))  Inventor's Signature Musuum Musuum Middle (if any!)  Residence: City State Country U.S. Citizenship U.S. Mailing Address 1100 PATRICIA, APT. 1706  City State TX ZIP Country SAN ANTONIO TX U.S. U.S.  NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle (if any!))  Inventor's Signature  Residence: City State Country Citizenship  Date  City State ZIP Country  A petition has been filed for this unsigned inventor or Surname  City State Country Citizenship  Mailing Address  City State ZIP Country  Citizenship	NAME OF SOLE OR FIRST IN	VENTOR:		ПАр	etition h	nas bee	en filed for t	his unsigr	ned inventor	
Residence: City State Country U.S. Citizenship U.S. Mailing Address 1100 PATRICIA, APT. 1706  City State TX ZIP Country U.S. Country U.S. Country U.S. Country SAN ANTONIO TX 7X 78213 U.S. NAME OF SECOND INVENTOR:  Given Name (first and middle [if any]) Family Name or Surname  City State Country U.S. Citizenship  Date Citizenship  City State Country Citizenship  Citizenship  Mailing Address  City State ZIP Country U.S. Citizenship	Given Name				Family Name					
Residence: City State Country U.S. Citizenship U.S.  Mailing Address 1100 PATRICIA, APT. 1706  City State TX ZIP Country U.S.  NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any])  Inventor's Signature  Residence: City State Country Citizenship  Mailing Address  City State ZIP Country U.S.  A petition has been filed for this unsigned inventor or Surname  Country Citizenship  Mailing Address  City State ZIP Country  Citizenship  Country Citizenship	············· / / // //	WIL	US	_					10-21-2003	
Mailing Address 1100 PATRICIA, APT. 1706  City State ZIP Country 78213 U.S.  NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any])  Inventor's Signature  Residence: City State Country Citizenship  Mailing Address  City State ZIP Country  Country  Country  Citizenship	Residence: City	State			Country C			Citizenship		
City State ZIP Country SAN ANTONIO TX 78213 U.S.  NAME OF SECOND INVENTOR:  Given Name (first and middle [if any])  Inventor's Signature  Residence: City State Country  Mailing Address  City State ZIP Country  Country U.S.  ZIP Country  A petition has been filed for this unsigned inventor  Family Name or Surname  Citizenship  Mailing Address  ZIP Country  Citizenship	SAN ANTONIO	TX			U.S.		U.S.	J.S.		
NAME OF SECOND INVENTOR:    A petition has been filed for this unsigned inventor   Given Name (first and middle [if any])	Mailing Address 1100 PATRICIA, APT. 1706					_				
NAME OF SECOND INVENTOR:  Given Name (first and middle [if any])  Inventor's Signature  Residence: City  State  Country  Citizenship  City  State  ZIP  Country  Country	City	State			ZIP			Country		
Given Name (first and middle [if any])  Inventor's Signature  Residence: City  State  Country  Citizenship  Mailing Address  ZIP  Country  Country	SAN ANTONIO	TX			$\perp$	78213			U.S.	
Given Name (first and middle [if any])  Inventor's Signature  Residence: City  Slate  Country  Citizenship  Mailing Address  ZIP  Country	NAME OF SECOND INVENTO	 R:		_		A pe	etition has b	een filed	for this unsigned inventor	
Signature  Residence: City  Slate  Country  Citizenship  Mailing Address  City  State  ZIP  Country	Given Name				1					
Mailing Address  City State ZIP Country									Date	
City State ZIP Country	Residence: City	State		Country		Citize	Citizenship			
	Mailing Address									
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.	City	State		ZIP		Coun	Country			
· · · · · · · · · · · · · · · · · · ·	Additional inventors or a legal re	presentative are be	ing named on	the	suppleme	ental she	et(s) PTO/SB/	02A or 02LR	atteched hereto.	

PTO/SB/81 (09-03)

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## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	ormation unless it displays a valid OMB control number.
Filing Date	
First Named Inventor	ANDREW NUSS
Title	A NEW GRAMMAR FOR REGULAR EXPR
Art Unit	
Examiner Name	
Attorney Docket Number	11103

I hereby appoint:				
Practitioners associated with the Customer Number:	27015			
OR				
Practitioner(s) named below:				
Name	Registration Number			
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to transact all business in the United States Patent and			
Please recognize or change the correspondence address for t	the shows identified confication to:			
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City	State Zip			
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Telephone	Fax			
lam the:				
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form	R 3.71. PTO/SB/96)			
SIGNATURE of	Applicant or Assignee of Record			
Name ANDREW NUSS				
Signature Mules Muss				
Date 10-21-2003	Telephone 650.533.8358			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
*Total of one (1) forms are submitted.				

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